Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

❒ Municipal Code 24.38 ❒ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ❒ **ALTER** ☒ **EXTEND** ☒ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township_____ Range_____ 1/4_____ 1/4_____ Section _____
   Block_____ Lot 1 Addition BULLENG
   Parcel ID 18 - 14 - 302 - 002 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 8300 BLUFF RD.

2. **Property use:** ☒ residential ❒ commercial ❒ other use
   Number of bedrooms 3 (THREE) Describe_____

3. **Type of Present Individual Disposal System** ☒ septic system ❒ lagoon ❒ other

4. **Description of proposed alteration, extension or repair** REPLACE FAILED DISTRIBUTION BOX AND ADD 208 L.F. OF ABSORBTION CHAMBER LATERAL

5. **Work to be done by:** ❒ owner ☒ contractor's name MATTHEW T. MANNEMO / MIDWEST UNDERGROUND, INC. NE P.E.#10336

6. **Estimated project:**
   a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name R. Dan Zabel Address 8300 Bluff Rd Phone: 467-2843
Lincoln NE 68517

Applicant Signature (owner or lessee) Dan Zabel

Please include the permit fee ($170) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 5/11/08 REVIEW: ☑ Approved ❒ Disapproved By:

Site visits
Date ___/___/___ By_____
Date ___/___/___ By_____
Date ___/___/___ By_____

Installation final written approval
Date___/___/___ By_____

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only HS 000102

Received: Date: 5/12/08 Amount $170.00 Check No. 5365 Initials RLF

White - Division Copy Pink - Business Office Revised 9-07

5-11-08 8300 BLUFF RD. ZABEL'S

PERC. TEST. BY M. MANNENO

HOLES DRILLED 5-9-08 6:00 - 7:00 PM. (FRIDAY)

FILLED W/ WATER FOLLOWING DRILLING; RAINED THAT NIGHT; HOLES FILLED SATURDAY AFTERNOON AFTER RAINED MOST OF DAY; HOLES FILLED AGAIN SUNDAY MORNING AT 8:30 AM. STILL HAD WATER AT TESTING TIME.

HOLE NO.	MEASUREMENT	TIME	MEASUREMENT	TIME	PERC. RATE
1	10 2/8"	4:35 PM	11 2/8"	5:05 AM	30 MPI
2	11 6/8		12 2/8		40 MPI
3	9 5/8		10 1/8		40 MPI
4	12 5/8		13 7/8		30 MPI
5	14 6/8		15 5/8		35 MPI
6	11 2/8	4:40 PM	12 3/8	5:10 PM	27 MPI

USE 35 MPI

3 BEDROOMS PER COUNTY ASSESSOR INFO.

PERC. RATE: 35 MIN/IN.

SQ. FT. DRAIN FIELD REQ.: 825 T. 14.1. TITLE 24

LENGTH OF CHAMBER W/ EFF. WIDTH = 1.5 x 32' = 4' = 206 LF.

OR

2- 104' RUNS W/ LAZEL GRADE.

Fax Cover Sheet

Lincoln-Lancaster County Health Department
Environmental Health - Consumer Services

3140 "N" Street Room 107
Lincoln, NE 68510-1514
Telephone: (402)441-8022
Fax: (402)441-6206

Date 3/29/00
# of Pages
including this page 3

To
Attention: Steve Balling
Subject:
Fax #: 467-4025

From
Name: Jerold Flood
Phone #: 441-4025

Message:

FORM 20104-0477
PLANS & SPECIFICATIONS FOR SEWAGE DISPOSAL SYSTEM (Annex to Application)
City Ordinance No. 9150 ☐
County Resolution No. 2832 ☐

LINCOLN-LANCASTER COUNTY HEALTH DEPARTMENT
Division of Environmental Health
2200 St. Marys Avenue
Lincoln, Nebraska 68502
Phone: 474-1541

D

DATE: _____

FILE NO. _____

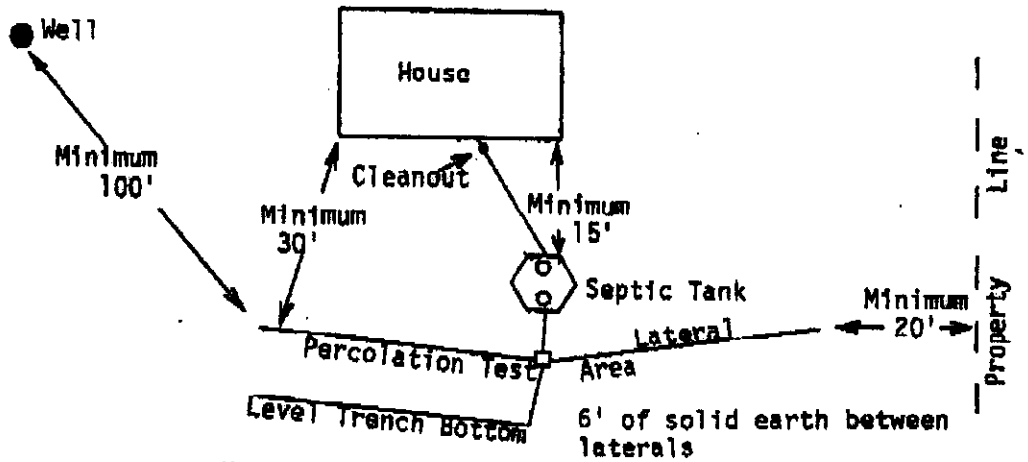
SPECIFICATIONS AS BUILT

A. BUILDING SEWER:
1. Material PVC ; Diameter 4 in.
2. Distance above basement floor _____ in., or below basement floor _____ in.
3. Distance between dwelling and septic tank 102 ft.
4. Number of clean-outs 2 .
5. Distances to:
Well or Suction Line 100'+ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

B. SEPTIC TANK:
1. Material Concrete ; No. of compartments _____ .
2. Capacity Pre Cast 1000 gals.;
3. Factory Built: Yes ☒ No ☐
(Company Pre Cast)
4. Manholes: Over Inlet; diam. _____ in.
Over Outlet; diam. _____ in.
Riser Above ☐ Below ☐ Grade _____ in.
5. Inlet: Baffle ☐ ; or Tee ☐
6. Outlet: Baffle ☐ ; or Tee ☐
7. Depth of top of tank below finished grade 15" in.
8. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

C. DISTRIBUTION BOX:
1. Material _____ ; Number - available outlets _____ .
2. Factory Built: Yes ☒ No ☐
(Company Pre Cast Co.)
3. Distance from Septic Tank 6' ft.

D. ABSORPTION FIELD: (Provide as built drawings on back of this form)
1. Type: Half Rounds ☐ Perforated Pipe ☒
Diameter of Half Round _____ or Perforated Pipe 4" .
Material: fiberglass ☐ ; plastic ☐ ; concrete ☐ ; other _____ .
2. Lateral Lines:
Number 3 ; Length of each line 100 , 100 , 100 , _____ , _____ ft.;
Total length of laterals 300 ft.;
Distance between lateral lines 18' ft.
3. Trench dimensions: Width 3' ft.; Slope 3" in/100 ft.; Average Depth 24-36-36 in.
4. Filter Material: Rock Gravel
Depth of Material 16" in.
5. Distances to:
Well or Suction Line _____ ft.; Stream _____ ft.; Pressure Line _____ ft.; Property Line _____ ft.

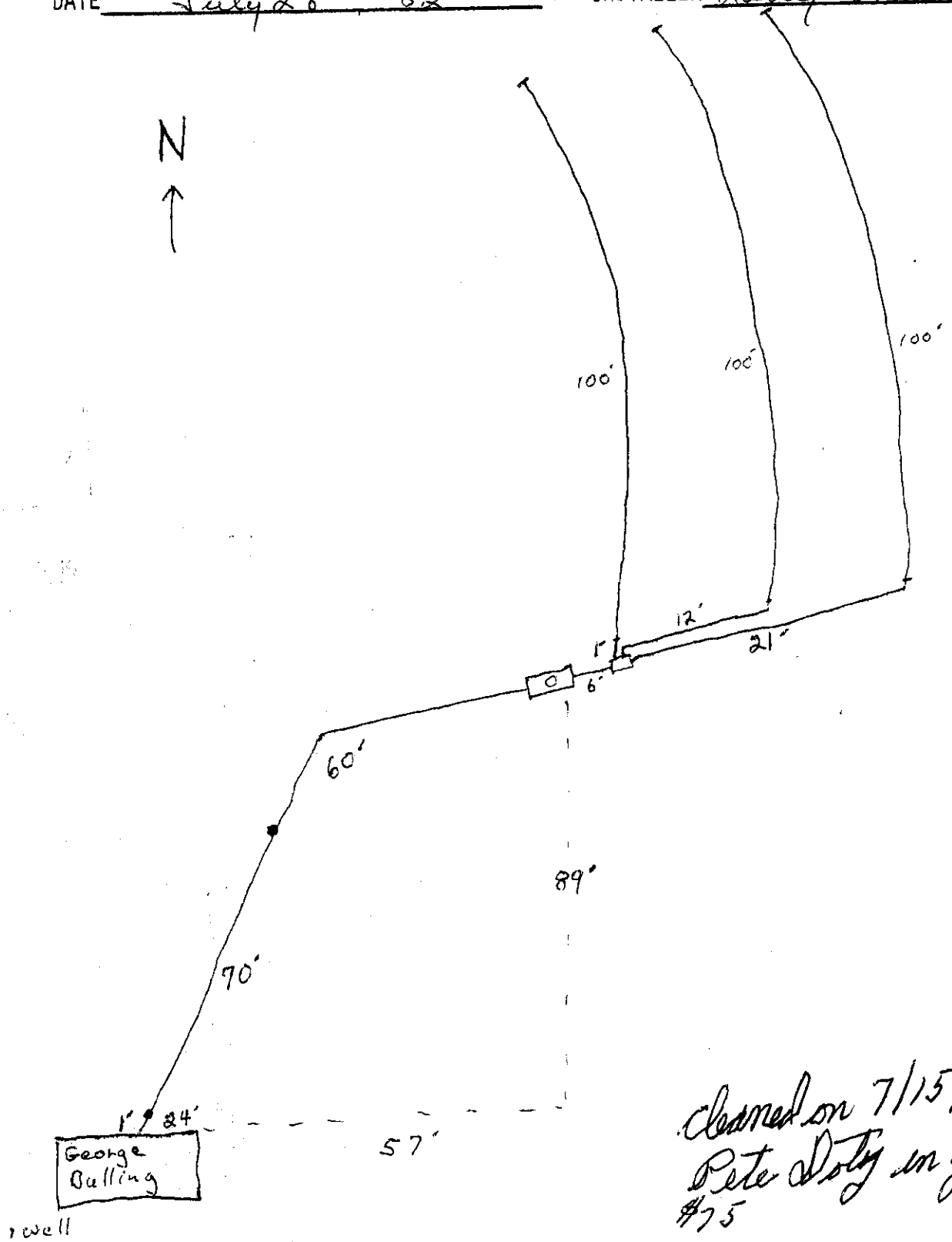


TYPICAL INDIVIDUAL SEWAGE SYSTEM DESIGN

TOTAL P.03

AS BUILT DRAWING OF SYSTEM

DATE July 28 82 INSTALLER Larry Schwarck



cleaned on 7/15/87 by Pete Doty in good shape J. Bulling #75

LLCHD HS000102

ORIGINAL

Ashland Drilling Company

Ashland, Nebraska 68003
Phone 944-3425

Nº 1104

Save this!

LOG OF WELL

Customer George Bulling Address R3 Lincoln, Ne.

Location of Farm ..... Location of Test Domestic

Date of Test 4-20-82

---0
-~~14~~clay
---21 clay
---31 clay
---41 clay-some rocks
---51 clay
---61 clay
---71 sandy clay
---81 silty sand
---91 fine sand
---101 silt
---111 silt-3' layer of sand
---121 silty clay
---131 silty blue clay
---141clay
---151 blue clay
---161 sandy blue clay
---171 sandy blue clay
---181 blue clay
---1~~96~~ sandy clay
---191 fine to course sand
---197 gravel
---201 ironstone-shale-layers of sandstone

4" PVC 200 plastic used as caseing
4"x5' Johnson screen #18 slot used

Static Water Level 105' Total Depth 197'

Estimate of Gallons per Minute 30 Cost per Foot .....

Materials Used ..... Total Cost .....

Frank Swenson
(Test Well Driller, Phone 944-3425, Ashland, Nebr.)

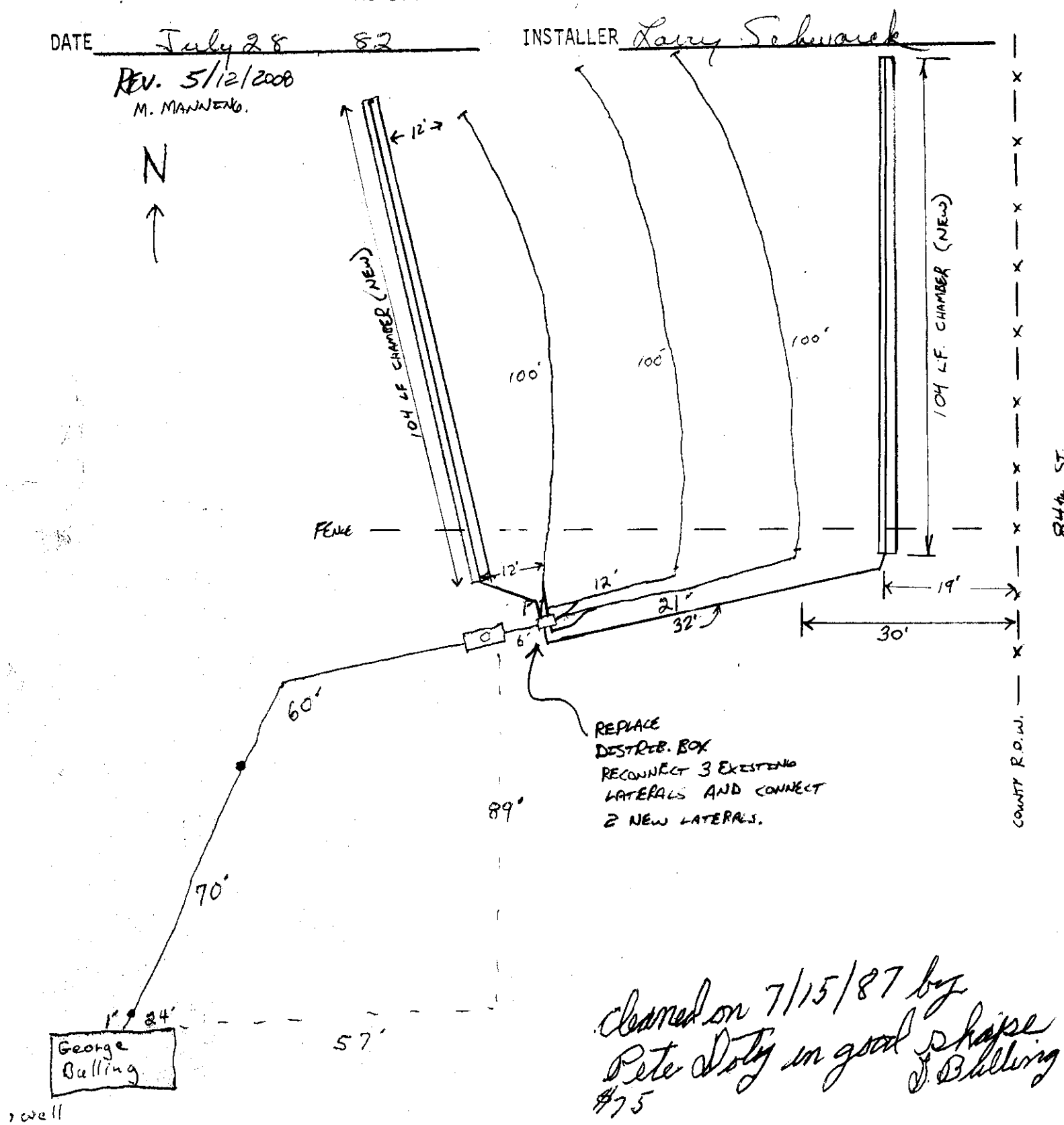
.....
(Customer or Owner authorizing work done)

5-15-2008 8:31:28

AS BUILT DRAWING OF SYSTEM

DATE July 28 82 INSTALLER Larry Schwarck

REV. 5/12/2008
M. MANWEG.



cleaned on 7/15/87 by
Pete Doty in good shape
J. Bulling
#75

Lincoln-Lancaster County Health Department
Environmental Public Health Division (402) 441-8027
3140 N Street Lincoln, NE 68510-1514

ON-SITE WASTE WATER SYSTEM
REPAIR PERMIT

System Type: STANDARD

No. HS000102

Situs: 8300 BLUFF RD RUR

Permit Fee: $170.00

Legal Description: T11N-R07E-S15-Lot 1

Owner: ZABEL, R DAN & KATHY
8300 BLUFF RD
LINCOLN NE
68517

Total Fees: $170.00

Issued:
Expires 05/12/2009

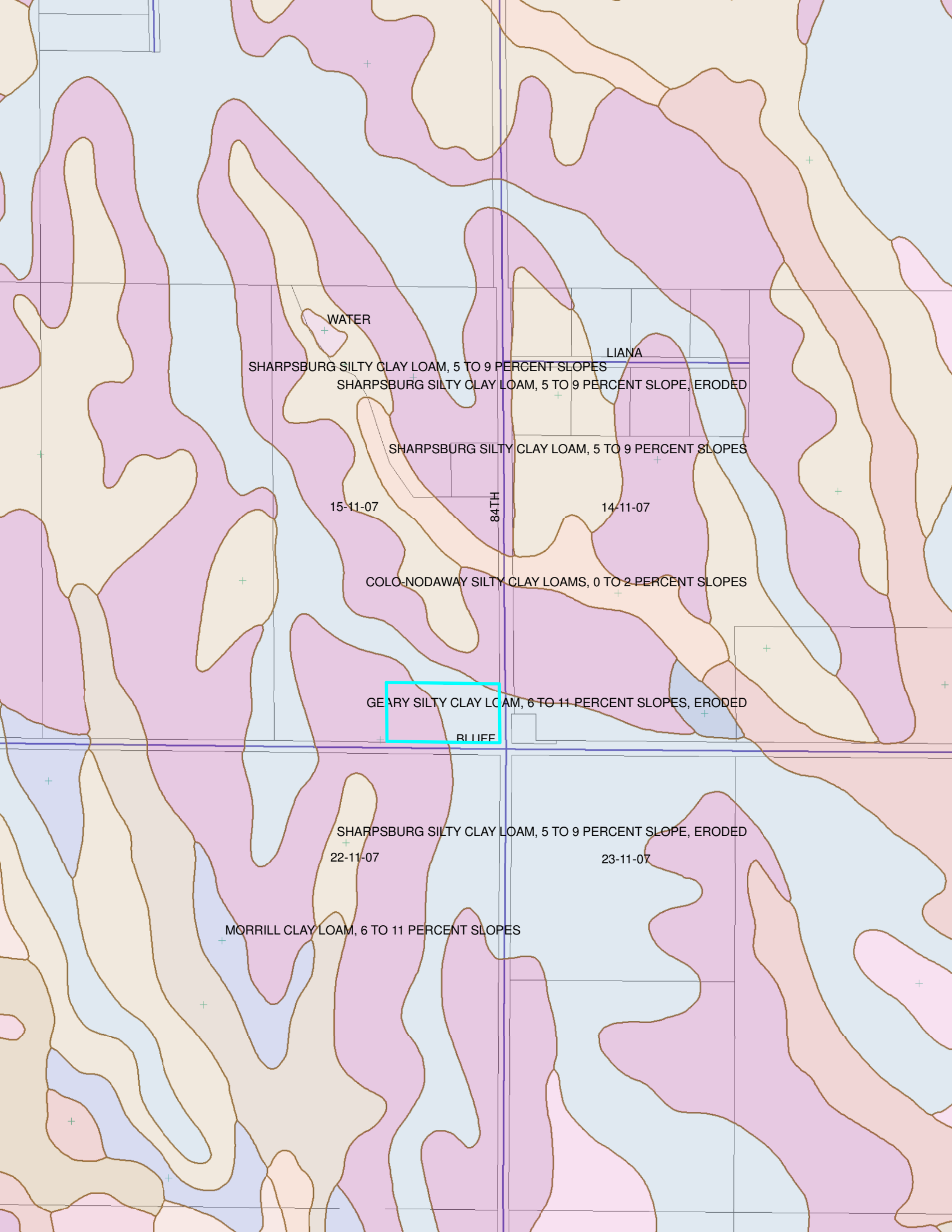
Bruce D. Dart, PhD, Health Director

Dear Water Well Permit Holder:

The above document is your permit to repair an existing On-site Waste Water System at the location listed. Please contact this office once repairs are complete to obtain final approval before use.

Bruce D. Dart, PhD
Health Director

MIDWEST UNDERGROUND
PO BOX 280
SYRACUSE NE 68446


WATER
LIANA
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPES
15-11-07
84TH
14-11-07
COLO-NODAWAY SILTY CLAY LOAMS, 0 TO 2 PERCENT SLOPES
GEARY SILTY CLAY LOAM, 6 TO 11 PERCENT SLOPES, ERODED
BLUFF
SHARPSBURG SILTY CLAY LOAM, 5 TO 9 PERCENT SLOPE, ERODED
22-11-07
23-11-07
MORRILL CLAY LOAM, 6 TO 11 PERCENT SLOPES

Application to Alter, Extend or Repair an Onsite Wastewater Treatment System

SCANNED

☐ Municipal Code 24.38 ☐ County Resolution Number 02-30

The undersigned hereby applies for a permit to: ☐ **ALTER** ☒ **EXTEND** ☒ **REPAIR** an existing wastewater treatment system, complying with appropriate Ordinance or Resolution, as marked above with drawings attached.

1. **Legal description of property:**
   Township 11 Range 7 1/4 ____ 1/4 ____ Section 15
   Block ____ Lot 1 Addition BULLENG
   Parcel ID 18 - 14 - 302 - 002 - 000 (i.e. 99-99-999-999-999)
   Street Address (no rural route) 8300 BLUFF RD.

2. **Property use:** ☒ residential ☐ commercial ☐ other use
   Number of bedrooms 3 (THREE) Describe ____

3. **Type of Present Individual Disposal System** ☒ septic system ☐ lagoon ☐ other

4. **Description of proposed alteration, extension or repair** REPLACE FAILED DISTRIBUTION BOX AND ADD 208 L.F. OF ABSORBTION CHAMBER LATERAL

5. **Work to be done by:** ☐ owner ☒ contractor's name MATTHEW T. MANNENO / MIDWEST UNDERGROUND, INC. NE I.E. #10336

6. **Estimated project:**
   a. Repair, replace, or minor extension with a cost less than $400 (no fee required).
   b. Total cost is greater than $400 (Return fee with this application)
   c. A permit is required if the use, operation, location, or type of system is changed.

Print Name R. Dan Zabel Address 8300 Bluff Rd Phone: 467-2843
Lincoln NE 68517

Applicant Signature (owner or lessee) Dan Zabel

Please include the permit fee ($170) with this application
Fee must be included before the application will be processed. Incomplete information will delay processing

---

HEALTH DEPARTMENT USE ONLY

Date received 5/11/08 REVIEW: ☑ Approved ☐ Disapproved By: ____

Site visits
Date 5/16/08 By DS
Date ____/____/____ By ____
Date ____/____/____ By ____

Installation final written approval
Date 5/16/08 By DS

Return application to:
Lincoln-Lancaster County Health Department
Environmental Public Health Division
3140 "N" Street, Lincoln, NE 68510
Phone: 441-8022

Business Office Use Only HS 000102

Received: Date: 5/12/08 Amount $170.00 Check No. 5365 Initials ____

White - Division Copy Pink - Business Office Revised 9-07